

Prevention Institute

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Approaching violence as a public health issue: A comprehensive approach to a complex problem

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Background

Violence is normal and common in California. Violence exacts a terrible price on all of us. It affects not only those who experience it but also family, friends, and neighbors. Thus, it has a more-widespread environmental impact: in fear, the related deterioration of communities, and its heavy financial cost. The fact that violence is normal means that our *norms* must be changed to substantially reduce violence. Although violence has reached epidemic proportions in the United States, it can be prevented.

Prevention is a *systematic* process that promotes healthy behaviors and reduces the likelihood or frequency of an incident, condition or illness occurring. Primary prevention should be the priority – addressing problems *before* they occur, rather than waiting to intervene after threats or incidents occur. Many violence practitioners in the U.S. concur that emerging violence prevention efforts in this country are reducing deaths and injuries from violence. Over the past few years, state and national violence rates have begun to fall, particularly in areas where prevention has been practiced. Exactly why violence rates are down is a matter of extensive discussion. (Later in this testimony there is brief commentary on the role of evaluation.)

Comprehensive Violence Prevention

Violence, like many of the health and social problems in the United States, consists of a complex set of issues. Therefore, its effective prevention requires looking beyond the individual to impact the systems that support or predict violence. Such an approach requires three key considerations for effectiveness: 1) Violence is a complex problem and therefore its prevention requires a comprehensive solution, 2) Consider risk and resiliency factors, and 3) Action must be taken.

1) Violence is a complex problem and requires a comprehensive solution

Prevention efforts that have achieved significant outcomes all required going beyond education to a multi-faceted approach. While information is important, alone it is insufficient. One tool to assist practitioners in developing comprehensive, multi-faceted prevention initiatives is the *Spectrum of Prevention*. The *Spectrum* outlines six levels of intervention.

Spectrum of Prevention

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|---------------------------------------|------------------------------------------------------|
| 1. Strengthening Individual Knowledge | Enhancing an individual's capability of preventing |
| and Skills | injury or crime |
| 2. Promoting Community Education | Reaching groups of people with information and |
| | resources to promote health and safety |
| 3. Educating Providers | Informing providers who will transmit skills and |
| | knowledge to others |
| 4. Fostering Coalitions and Networks | Bringing together groups and individuals for broader |
| | goals and greater impact |
| 5. Changing Organizational Practices | Adopting regulations and norms to improve health |
| | and safety and creating new models |
| 6. Influencing Policy and Legislation | Developing strategies to change laws and policies to |
| | influence outcomes in health, education and justice |

By working at all six levels, prevention initiatives can achieve greater impact. The *Spectrum* has been applied in locales throughout the nation to issues ranging from traffic safety, nutrition, and physical activity promotion to violence prevention. A critical component of the *Spectrum* and of a comprehensive approach is the notion of linkages. Implicit in this tool is the concept that all of the levels are linked together to result in an integrated approach. Each level is necessary, but not sufficient to address violence within communities. Within the model, the importance of linkages is emphasized in fostering coalitions and networks, iii highlighting the importance of utilizing broad-based partnerships and participation.

Evaluation

Data and evaluation inform all levels of the Spectrum. Any proposed activity should be based on data showing 1) the issue is important, 2) the target population is appropriate, and 3) the intervention is promising. To develop a successful approach it is essential to first review the data and determine an appropriate set of objectives. During implementation, ongoing evaluation of the overall approach and the individual activities at each level of the *Spectrum* will provide information necessary for making ongoing adjustments to the activities that are best suited to meet overall objectives.

Evaluation is a critical component of violence prevention. There is emerging knowledge of effective interventions in violence prevention and numerous promising programs. Nevertheless, thorough evaluation of most of these efforts has not been undertaken. Further, evaluation itself is only a blunt tool and often forces interventions into a funnel of simplification in order to evaluate them. This can in and of itself be detrimental to the advancement of the state of the art of violence prevention. When such a powerful force as evaluators (who determine national 'success' in many ways) play a role in reducing the comprehensiveness of efforts, they take the field away from the direction in which the greatest successes will be achieved. Too often,

evaluation focuses on single programs or simplified efforts. Effective violence prevention is comprehensive, however, and its evaluation must take this into account.

At its best, evaluation can provide ongoing feedback that can then be used to strengthen ongoing efforts and strategy development. Evaluation should focus on the context in which violence prevention efforts take place, multifaceted efforts, the interaction between different strategies and activities (e.g. synergy), and integrated partnerships. Effective evaluation must be based not only on data and outcomes but also on the wisdom of practitioners and the local community. As evaluation methods improve to capture the complex impact of comprehensive approaches, communities will have important information to improve efforts.

2) Consider Risk and Resiliency Factors

While data and statistics profile the trends of violence, they do not explain the factors that influence its occurrence. Risk factors are traits or characteristics that increase the relative risk of an individual or community being affected by or perpetrating violence. National public health practitioners and researchers, in youth oriented discussions, have identified nine major risk factors for violence: economics, oppression, family dynamics, alcohol and other drugs, w

representatives from different violence prevention initiatives – the project synthesized their input and published "Cultivating Peace in Salinas: A Framework for Violence Prevention."

The Framework provides a snapshot of community needs as well as an outline of potential actions. The document begins with an environmental review. It analyzes risk and resiliency factors, community climate and norms, and best practices from across the U.S. The Framework clearly recommends that, rather than creating new programs, the priority for achieving more effective practice in the city is to focus on "systems change." The Framework's authors emphasize that work to establish lasting, coordinated, systemic changes would help minimize risks to community members, maximize their resiliency against violence, and promote a culture of caring. The Framework – based upon the *Spectrum of Prevention* — identifies sixteen interrelated recommendations that were seen as critical in achieving the ultimate goal of developing a culture of caring in Salinas. Since its publication, an expanded core group has been prioritizing the recommendations, identifying essential steps to accomplish them, and mobilizing community support to bring the plan to fruition. The Framework is viewed as the foundation for future collaborations to prevent youth violence prevention in particular, and to promote overall community well being in general.

State example

Shifting the Focus: An Interdisciplinary Framework for Advancing Violence Prevention

Shifting the Focus is a state interagency violence prevention partnership. Its membership, California's state government leaders, representing more than thirty departments, recognizes that effective violence prevention requires a new way of doing business. This new way of operation will ensure that California communities are well-served through practice at the state level that supports success at the local level.

Over the years, as public concern about violence has grown, numerous projects and independent sources of funding have been established. But, too often, the left hand doesn't know what the right one is doing. The *Shifting the Focus* group is committed to crafting an integrated approach to the state's violence prevention goals without sacrificing current programs or curbing local initiative.

Conceptual example

Collaborative Violence Prevention

Given the complexity of violence and its underlying causes, it is critical that the various strands of violence prevention work together to advance successes. That is, it is important to build upon and synthesize the skills learned from different areas of violence prevention. For example, from violence against women, a great deal has been learned about building a movement, from child abuse the learning has centered around providing services, and from youth violence the concept of prevention has become clearer. The perception is that these groups tend to work independently and could enhance their effectiveness by working together. Thus far, they have recognized the need to collaborate on services and increasingly they are seeing the potential of collaborating in terms of prevention. Bringing people together from each of these areas will focus on the strengths that each brings to the prevention field, and in so doing, strengthen prevention practice. Recently, the Family Violence Prevention Fund and the National Funding Collaborative

sponsored *Collaborative Violence Prevention* and brought together leaders from these three key fields to advance collaboration. Similarly, other efforts are increasingly recognizing the importance of this type of work and thinking.

Key Recommendations

- 1. Adopt primary prevention as a key priority and strategy to preempt needless deaths, injury and suffering as a result of violence;
- 2. Approach violence as a public health problem. That is to say, focus on reducing or eliminating violence *before* it occurs as opposed to containment and suppression efforts;
- 3. Encourage comprehensive strategy development to reduce violence. The *Spectrum of Prevention* is a tool to help develop such multifaceted approaches;
- 4. Encourage and support partnerships and efforts that span sectors and disciplines including health, education, justice, and others;
- 5. Encourage and support partnerships and efforts that span different types of violence including child abuse, domestic/spousal violence, suicide, and youth violence;
- 6. Recognize that violence prevention is part of a cluster of related programs and initiatives which must work in collaboration to develop efforts to foster resiliency and reduce risk;
- 7. Support community efforts: increase the likelihood of local success through effective practice at the state level;
- 8. Ensure that practitioners are better equipped to develop and provide effective violence prevention initiatives through training in areas such as evaluation techniques, interdisciplinary collaboration, and practice;
- 9. Encourage leadership and skill-building, among a new cadre of violence prevention practitioners across the state, regarding evaluation, inter-disciplinary collaboration, and practice;
- 10. Expand the field of evaluation to ensure that evaluation is useful for measuring multifaceted efforts as well as for improving ongoing efforts and strategy.

End Notes

¹ National Crime Prevention Council (1999). Six Safer Cities: On the Crest of the Crime Prevention Wave.

ⁱⁱCohen and Swift (1999). The spectrum of prevention: developing a comprehensive approach to injury prevention. Injury Prevention, 5: 203-207.

iii Cohen L, Baer N & Satterwhite, P. Eight steps to effective coalitions. *Injury Awareness and Prevention Center News*, December 1991;4(10)

^{iv} Cohen L. and Swift, S., A Public Health Approach to Violence in the United States, Environment and Urbanization, 1993. 5(2): p. 50-66

^v Werner E & Smith R. 1992. Overcoming the odds: High-risk children from birth to adulthood. Ithaca, New York: Cornell University Press.

vi Cohen, L. & Swift, S. (1999). The Spectrum of Prevention: developing a comprehensive approach to injury prevention. Injury Prevention, 5, 203-207.